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APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/US00/21886 08/10/2000

** FOREIGN APPLICATIONS *****

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY AL	SHEETS DRAWING 1	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

25006

TITLE

USE OF GABA AGONISTS FOR TREATMENT OF SPASTIC DISORDERS, CONVULSIONS, AND EPILEPSY

FILING FEE RECEIVED 349	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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